PTO/SB/01 (10-01)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted with Initial Filing

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

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Attorney Docket Number		AUR-2001US01			
First Named Inventor		Matthieu Guitton			
COMPLETE IF KNOWN					
Application Number	10/812,298				
Filing Date	03/2	9/2004			
Art Unit					
Examiner Name					

As the below named inventor, I her	reby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.								
	•	,	iah a aataat is ss					
I believe I am the original and first inv	entor of the subject matter t	which is claimed and for wh	ich a patent is soug	int on the invention entitled:				
METHODS FOR THE TREATMENT OF TINNITUS INDUCED BY COCHLEAR EXCITOTOXICITY								
	(Tide of the c	to continue						
(Title of the Invention) the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY) 03/29/2004 as United States Application Number or PCT International								
Application Number 10/812,298 and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.								
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO				
		,,						
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

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DECLARATION — Utility or Design Patent Application

I Direct all correspondence to: I▼ I	Customer Number or Bar Code Labe	1 41.		OR C	orrespondence address below	
Name						
Address			,			
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Country	Tele	phone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:						
Given Name Matthieu (first and middle [if any])			Guitton Family Name or Surname			
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Mailing Address						
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City		State		ZIP	Country	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor						
Jean-Luc Given Name (first and middle [if any])			Family or Surn			
Inventor's Signature					June 19th 04 Date	
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Residence: City State				Country	Citizenship	
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Cournonterral				FR-34660	France	
City State ZIP Country						
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

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DECLARATION

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

	\neg						
Name of Additional Joint Inventor, if an	ıy:			A petition has been f	filed for th	nis unsigned inventor	
Remy Given Name			Pujol Family Name or Surname				
Inventor's Signature						Date June 18 vu	
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Mailing Address							
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Name of Additional Joint Inventor, if any:							
Given Family Name Name or Surname							
Inventor's Signature						Date	
Residence: City	Sta	ate	<u> </u> c	Country		Citizenship	
Mailing Address				· · · · · · · · · · · · · · · · · · ·			
Mailing Address							
City	Sta	ate		ZIP	Country	y	
Name of Additional Joint Inventor, if an	ıy:		<u></u>	A petition has been filed	d for this	unsigned inventor	
			Family Name or Surname				
Inventor's Signature Date						Date	
Residence: City	State			Country		Citizenship	
Mailing Address							
Mailing Address							
City	State			ZIP	Coi	untry	

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.